A commence of the commence of	and the second s
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY Page 1 of
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  X July Agent Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?   No
1. Article Addressed to:  Daehan Solution Ala  clo Yeung Ki Kim  9101 County Rd 26	If YES, enter delivery address below: No
9101 County hazo Hope, Hull, AL 36043	3. Service Type  Contified Mail  Registered Insured Mail  C.O.D.
1	4. Restricted Delivery? (Extra Fee)
(Transfer from service label)	102595-02-M-1540
PS Form 3811, February 2004 Domestic	Return Receipt